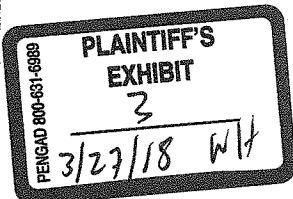


Exhibit 7

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

FEB 05 2014

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONY NY 11030

SHOP #: 0502

PERIOD: 01/2014

REF. #: 0502201401

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-XXXX	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-XXXX	BARBER, JERRY	30.00		.00	
XXX-XX-XXXX	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-XXXX	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-XXXX	EINHORN, RICHARD	30.00		.00	
XXX-XX-XXXX	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-XXXX	LATRATTA, ROBERT	30.00		.00	
XXX-XX-XXXX	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-XXXX	MAYO, SILVESTRE	30.00		.00	
XXX-XX-XXXX	MENNA, LEONARD J.	30.00		.00	
XXX-XX-XXXX	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-XXXX	MOHAMMED, REYAZ MICKEY	30.00		.00	
XXX-XX-XXXX	PEREZ, AMANDO	30.00		.00	
XXX-XX-XXXX	PERSAD, RAMDEO	30.00		.00	
XXX-XX-XXXX	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-XXXX	SIERRA, NALSON	30.00		.00	
XXX-XX-XXXX	WARD, CURTIS	30.00		.00	
XXX-XX-XXXX	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-XXXX	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 19		CURRENT DUE: 570.00			
		TOTAL DUE: 570.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life-Benefit-Plan-Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

FEB 18 2014

UNION ALL - PURPOSE REPORTING FORM


LIBERTY ASHES
112 PHYLIS COURT
ELMONY NY 11030

SHOP #: 0502

PERIOD: 02/2014

REF. #: 0502201402

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX- 	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	EINHORN, RICHARD	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	LAFRATTA, ROBERT	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MAYO, SILVESTRE	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	MOHAMMED, REYAZ MICKEY	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PERSAD, RAMDEO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 19		CURRENT DUE: 570.00			
		TOTAL DUE: 570.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address:

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

MAR 31 2018

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 03/2014

REF. #: 0502201403

PAGE #: 1

1897

610.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	EINHORN, RICHARD	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	LAFRATTA, ROBERT	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MAYO, SILVESTRE	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	MOHAMMED, REYAZ MICKEY	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PERSAD, RAMDEO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
	Francisco, Anvarus Montoya	30.00			
MEMBERS IN SHOP: 19		CURRENT DUE: 570.00			
		TOTAL DUE: 570.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

APR 21 2014

UNION ALL - PURPOSE REPORTING FORM


LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 04/2014

REF. #: 0502201404

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE-BENEFIT PLAN PAYMENT
XXX-XX- 	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREV, DERECK MICHAEL	30.00		.00	
XXX-XX-	EINHORN, RICHARD	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00	75.00	.00	
XXX-XX-	LAFRATTA, ROBERT	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MAYO, SILVESTRE	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	MOHAMMED, REYAZ MICKEY	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PERSAD, RAMDEO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 20		CURRENT DUE: 600.00		75.00	
		TOTAL DUE: 600.00		75.00	
		+ 30.00			
		630.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation)

Life Benefit Plan Payment

Employer may retain YELLOW COPY for its own files

Please notify the Union of any Employee's change of address

LIFE032

AGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

MAY 12 2014

UNION ALL - PURPOSE REPORTING FORM

#2064
LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

600.00

SHOP #: 0502

PERIOD: 05/2014

REF. #: 0502201405

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	EINHORN, RICHARD	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LAFRATTA, ROBERT	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MAYO, SILVESTRE	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	MOHAMMED, REYAZ MICKEY	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PERSAD, RAMDEO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 20		CURRENT DUE: 600.00			
		TOTAL DUE: 600.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LIFE033

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

JUN 17 2014

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 06/2014

REF. #: 0502201406

PAGE #: 1

L #2173

570.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ADREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	EINHORN, RICHARD	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LAFRATTA, ROBERT	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MAYO, SILVESTRE	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	MOHAMMED, REYAZ MICKEY	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PERAZO, RAMON	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 20		CURRENT DUE: 600.00			
		TOTAL DUE: 600.00			
		30.00			
		570.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

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Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

JUL 22 2014

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502




















PERIOD: 07/2014

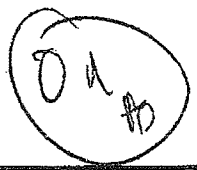
REF. #: 0502201407

PAGE #: 1

570.00

#2288

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX- 	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX- 	BARBER, JERRY	30.00		.00	
XXX-XX- 	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX- 	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX- 	EINHORN, RICHARD	30.00		.00	
XXX-XX- 	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX- 	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX- 	LAFRATTA, ROBERT	30.00		.00	
XXX-XX- 	LINCIFORT, WILDECK	30.00		.00	
XXX-XX- 	MAYO, SILVESTRE	30.00		.00	
XXX-XX- 	MENNA, LEONARD J.	30.00		.00	
XXX-XX- 	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX- 	MOHAMMED, REYAZ MICKEY	30.00		.00	
XXX-XX- 	PEREZ, AMANDO	30.00		.00	
XXX-XX- 	SHERSHINE, RAMLOCHAN	30.00		.00	
XXX-XX- 	SIERRA, NALSON	30.00		.00	
XXX-XX- 	WARD, CURTIS	30.00		.00	
XXX-XX- 	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX- 	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 19		CURRENT DUE: 570.00			
		TOTAL DUE: 570.00			



NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

AUG 12 2014

UNION ALL - PURPOSE REPORTING FORM




















LIBERTY ASHES
112 PHYLIS COURT
ELMHURST NY 11030

SHOP #: 0502

PERIOD: 08/2014

REF. #: 0502201408

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX- 	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX- 	BARBER, JERRY	30.00		.00	
XXX-XX- 	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX- 	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX- 	ELMHORN, RICHARD	30.00		.00	
XXX-XX- 	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX- 	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX- 	LAFRATTA, ROBERT	30.00		.00	
XXX-XX- 	LINCIFORT, WILDECK	30.00		.00	
XXX-XX- 	MAYO, SILVESTRE	30.00		.00	
XXX-XX- 	MENNA, LEONARD J.	30.00		.00	
XXX-XX- 	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX- 	MOHAMMED, REYAZ MICKEY	30.00		.00	
XXX-XX- 	PEREZ, AMANDO	30.00		.00	
XXX-XX- 	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX- 	SIERRA, NALSON	30.00		.00	
XXX-XX- 	WARD, CURTIS	30.00		.00	
XXX-XX- 	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX- 	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 19		CURRENT DUE: 570.00			
		TOTAL DUE: 570.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 09/2014

REF. #: 0502201409

PAGE #: 1

2007

480.00

OCT 10 2014

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LAFRATTA, ROBERT	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MAYO, SILVESTRE <i>per note</i>	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 17		CURRENT DUE: 510.00			
		TOTAL DUE: 510.00			
		30.00			
		480.00			
				OK AS	

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

UNION ALL - PURPOSE REPORTING FORM

NOV 18 2014

☐ # 2821 30.00 ☐

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 10/2014

☐ # 2715

450.00

REF. #: 0502201410

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LAFRATTA, ROBERT	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MAYO, SILVESTRE	30.00	8/12/14	.00	
XXX-XX-	MENNA, LEONARD J.	30.00	Terminated	.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	

MEMBERS IN SHOP: 17

CURRENT DUE:

\$10.00

TOTAL DUE:

\$10.00

60.00

Short

\$30.00

450.00

450.00

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation)

Life Benefit Plan Payment

Employer may retain YELLOW COPY for its own files

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET

BROOKLYN, NEW YORK 11209

(718) 238-2399

union plan

DEC 30 2014

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMHURST NY 11030

SHOP #: 0502

















PERIOD: 11/2014

REF #: 0502201411

AGE #: 1

L # 2822

510.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX- 	BANDOO, DEARMINDRA	10/14 - 30.00		00	
XXX-XX- 	BARBER, JERRY	11/14 - 480.00		00	
XXX-XX- 	BELLINO, MICHAEL FRANK			00	
XXX-XX- 	DE ABREU, DERECK MICHAEL			00	
XXX-XX- 	GHANSHIAM, B CHANDRA			00	
XXX-XX- 	GONZALEZ MONTAS, FRANCISCO ARGENIS			00	
XXX-XX- 	LAFRATTA, ROBERT			00	
XXX-XX- 	LINCIFORT, WILDECK			00	
XXX-XX- 	MENNA, LEONARD J.			00	
XXX-XX- 	MITCHELL, DERYCK C.			00	
XXX-XX- 	PEREZ, AMANDO			00	
XXX-XX- 	SHESHERINE, RAMLOCHAN			00	
XXX-XX- 	SIERRA, NALSON			00	
XXX-XX- 	WARD, CURTIS			00	
XXX-XX- 	WILLIAMS, TISHAWN			00	
XXX-XX- 	WYNN, CURTIS D.			00	
MEMBERS IN SHOP: 16		CURRENT DUE: 480.00			
		TOTAL DUE: 480.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LIFE039

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

JAN 13 2015

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONY NY 11030

SHOP #: 0502

PERIOD: 12/2014

REF. #: 0502201412

PAGE #: 1

\$2893 450.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE-BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LAFRATTA, ROBERT	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 16		CURRENT DUE: 480.00			
		TOTAL DUE: 480.00			
		30.00			
		450.00			
		(149)			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

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Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

FEB 03 2015

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 01/2015

REF. #: 0502201501

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY..	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LAFRATTA, ROBERT	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	

MEMBERS IN SHOP: 16

CURRENT DUE:

480.00

TOTAL DUE:

480.00

Short mt. 10/14

30.00

510.00

- 30.00 LAFRATTA

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
 BROOKLYN, NEW YORK 11209
 (718) 238-2399

FEB 24 2015

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
 112 PHYLIS COURT
 ELMONY NY 11030

SHOP #: 0502

PERIOD: 02/2015

REF. #: 0502201502

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		00	
XXX-XX-	BARBER, JERRY "	30.00		00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		00	
XXX-XX-	LINCIFORT, WILDECK	30.00		00	
XXX-XX-	MENNA, LEONARD J.	30.00		00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		00	
XXX-XX-	PEREZ, AMANDO	30.00		00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		00	
XXX-XX-	SIERRA, NALSON	30.00		00	
XXX-XX-	WARD, CURTIS	30.00		00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		00	
XXX-XX-	WYNN, CURTIS D.	30.00		00	
MEMBERS IN SHOP: 15		CURRENT DUE: 450.00			
		TOTAL DUE: 450.00			

OWAS

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address:

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

UNION ALL - PURPOSE REPORTING FORM

MAR 31 2015

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 03/2015

REF. #: 0502201503

PAGE #: 1

L # 3133

450.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY.	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 15		CURRENT DUE:	450.00		
		TOTAL DUE:	450.00		

TOTAL DUE: 450.00
SUA

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

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Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LIFE043

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

UNION ALL - PURPOSE REPORTING FORM

APR 07 2015

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

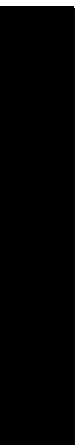














PERIOD: 04/2015

REF. #: 0502201504

PAGE #: 1

#3153

450.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE-BENEFIT PLAN PAYMENT
XXX-XX- 	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX- 	BARBER, JERRY	30.00		.00	
XXX-XX- 	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX- 	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX- 	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX- 	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX- 	LINCIFORT, WILDECK	30.00		.00	
XXX-XX- 	MENNA, LEONARD J.	30.00		.00	
XXX-XX- 	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX- 	PEREZ, AMANDO	30.00		.00	
XXX-XX- 	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX- 	SIERRA, NALSON	30.00		.00	
XXX-XX- 	WARD, CURTIS	30.00		.00	
XXX-XX- 	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX- 	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 15		CURRENT DUE:	450.00		
		TOTAL DUE:	450.00		

OK AP

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

UNION ALL - PURPOSE REPORTING FORM

MAY 12 2015

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 05/2015

REF. #: 0502201505

PAGE #: 1

3267

450.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA -	30.00		.00	
XXX-XX-	BARBER, JERRY -	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 15		CURRENT DUE: 450.00			
		TOTAL DUE: 450.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address.

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

JUN 24 2015

UNION ALL - PURPOSE REPORTING FORM

4123
LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

30.00

SHOP #: 0502

PERIOD: 06/2015

REF. #: 0502201506

PAGE #: 1

3429

410.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 15		30.00			
CURRENT DUE:		450.00			
TOTAL DUE:		550.00			
OC. CC # 4123 (8/15)		420.00			
		0.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address.

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

UNION ALL - PURPOSE REPORTING FORM

AUG 07 2015

#4123 30.00 (Priyor. S)
LIBERTY ASHES
112 PHYLIS COURT
EL MONTE, CA 91734
#4199 60.00 (9/15)
#4090 420.00

SHOP #: 0502

PERIOD: 07/2015

REF. #: 0502201507

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MENNA, LEONARD J.	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	

MEMBERS IN SHOP: 15

CURRENT DUE:

450.00

TOTAL DUE:

450.00

Missing:

1) Cabrera, J → 910 cc # 4199 30.00
2) Priyor, J → 910 cc # 4199 30.00
3) Powell, Q → 910 cc # 4199 30.00

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LIFE047

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

UNION ALL - PURPOSE REPORTING FORM

AUG 20 2015


















LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 08/2015

REF. #: 0502201508

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX- 	BANDOO, DEARMINDRA 6/15 - 30.00	30.00		.00	
XXX-XX- 	BARBER, JERRY	30.00		.00	
XXX-XX- 	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX- 	CABRERA, JESSE 7/15 - 30.00	30.00		75.00	
XXX-XX- 	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX- 	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX- 	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX- 	LINCIFORT, WILDECK	30.00		.00	
XXX-XX- 	MITCHELL, DERYCK C. 8/15 - 510.00	30.00		.00	
XXX-XX- 	PEREZ, AMANDO	30.00		.00	
XXX-XX- 	POWELL, QUANANE	30.00		75.00	
XXX-XX- 	PRYOR, JERMAINE	30.00		.00	
XXX-XX- 	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX- 	SIERRA, NALSON	30.00		.00	
XXX-XX- 	WARD, CURTIS	30.00		.00	
XXX-XX- 	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX- 	WYNN, CURTIS D.	30.00		.00	

MEMBERS IN SHOP: 17

CURRENT DUE:

\$10.00

150.00

TOTAL DUE:

\$10.00

150.00

missing pmt's

1 Pryor, J -

30.00 (7/15)

1 Powell, Q (6/15) - 30.00

570.00

570.00

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address:

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

SEP 14 2015

UNION ALL - PURPOSE REPORTING FORM


















LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 09/2015

REF. #: 0502201509

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX- 	BANDOO, DEARMINDRA	7/15 - 60.00 + 60.00			
XXX-XX- 	BARBER, JERRY	9/15 60.00		.00	
XXX-XX- 	BELLINO, MICHAEL FRANK	7/15 510.00		.00	
XXX-XX- 	CABRERA, JESSE		30.00	.00	
XXX-XX- 	DE ABREU, DERECK MICHAEL		30.00	.00	
XXX-XX- 	GHANSHIAM, B CHANDRA		30.00	.00	
XXX-XX- 	GONZALEZ MONTAS, FRANCISCO ARGENIS		30.00	.00	
XXX-XX- 	LINCIFORT, WILDECK		30.00	.00	
XXX-XX- 	MITCHELL, DERYCK C.		30.00	.00	
XXX-XX- 	PEREZ, AMANDO		30.00	.00	
XXX-XX- 	POWELL, QUANANE	6/15, 7/15	60.00	.00	
XXX-XX- 	PRYOR, JERMAINE	7/15	30.00	.00	
XXX-XX- 	SHESHERINE, RAMLOCHAN		30.00	.00	
XXX-XX- 	SIERRA, NALSON		30.00	.00	
XXX-XX- 	WARD, CURTIS		30.00	.00	
XXX-XX- 	WILLIAMS, TISHAWN		30.00	.00	
XXX-XX- 	WYNN, CURTIS D.		30.00	.00	
MEMBERS IN SHOP: 17		CURRENT DUE:	510.00		
		TOTAL DUE:	510.00	180.00	
				630.00	

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address:

LIFE049

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

NOV 03 2015

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT, NY 11030

SHOP #: 0502

PERIOD: 10/2015

REF. #: 0502201510

PAGE #: 1

L #4384

480.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	CABRERA, JESSE	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, B CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	POWELL, GUANANI	30.00		.00	
XXX-XX-	PRYOR, JERMAINE	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 17		CURRENT DUE: 510.00			
		PREVIOUS BALANCE DUE: 005.00			
		TOTAL DUE: 2,575.00		510.00	
		30.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation)

Life Benefit Plan Payment

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

DEC 14 2015

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 11/2015

REF. #: 0502201511

PAGE #: 1

3509

480.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	CABRERA, JESSE	30.00		.00	
XXX-XX-	DE ABREV, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PRYOR, JERMAINE	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 16		CURRENT DUE:	480.00		
		TOTAL DUE:	480.00		

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address:

LIFE051

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

FEB 01 2016

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 12/2015

REF. #: 0502201512

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	CABRERA, JESSE	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHAM, CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINGIFORT, WILDECK	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PRYOR, JERMAINE	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 16		CURRENT DUE: 480.00			
TOTAL DUE: 480.00					

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

FEB 19 2016

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 01/2016

REF. #: 0502201601

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	CABRERA, JESSE	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	GHANSHIAM, CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PRYOR, JERMAINE	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 16		CURRENT DUE:	480.00		
		TOTAL DUE:	480.00		

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

MAR 11 2016

UNION ALL - PURPOSE REPORTING FORM

#3908 30.00 (3/16)
LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030
#3947 60.00 (4/16)
#3780 00.00 (4/16)
du As

SHOP #: 0502

PERIOD: 02/2016

REF. #: 0502201602

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-XXXX	VBANDOO, DEARMINDRA	30.00		.00	
XXX-XX-XXXX	VBARBER, JERRY	30.00		.00	
XXX-XX-XXXX	VBELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-XXXX	VCABRERA, JESSE	30.00		.00	
XXX-XX-XXXX	VDE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-XXXX	VGHANSHIAM, CHANDRA	30.00		.00	
XXX-XX-XXXX	VGONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-XXXX	VINCIFORT, WILDECK	30.00		.00	
XXX-XX-XXXX	VMITCHELL, DERYCK C.	30.00		.00	
XXX-XX-XXXX	VPEREZ, AMANDO	30.00		.00	
XXX-XX-XXXX	VPRYOR, JERMAINE	30.00		.00	
XXX-XX-XXXX	VSHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-XXXX	VSIERRA, NALSON	30.00		.00	
XXX-XX-XXXX	VWARD, CURTIS	30.00		.00	
XXX-XX-XXXX	VWILLIAMS, TISHAWN	30.00		.00	
XXX-XX-XXXX	VWYNN, CURTIS D.	30.00		.00	

MEMBERS IN SHOP: 16

CURRENT DUE:

480.00

TOTAL DUE:

480.00

missing:

1/ Adams, E → ac ac # 3908 30.00
2/ Falcon, J → ac ac 3947 30.00
3/ Console, R → ac ac 3947 30.00

00.00

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address:

LIFE054

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

APR 12 2016

UNION ALL - PURPOSE REPORTING FORM

- #3947

60.00 (4/16)

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 03/2016

REF. #: 0502201603

- #3908

600.00

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-XXXX	ADAMS, ERIC	30.00		75.00	
XXX-XX-XXXX	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-XXXX	BARBER, JERRY	30.00		.00	
XXX-XX-XXXX	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-XXXX	CABRERA, JESSE	30.00		.00	
XXX-XX-XXXX	CONSOLO, ROBERT	30.00		.00	
XXX-XX-XXXX	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-XXXX	FALCON, JOSE	30.00		75.00	
XXX-XX-XXXX	GHANSHAM, CHANDRA	30.00		.00	
XXX-XX-XXXX	GONZALEZ MONTAS, FRANCISCO ARGONIS	30.00		.00	
XXX-XX-XXXX	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-XXXX	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-XXXX	PEREZ, AMANDO	30.00		.00	
XXX-XX-XXXX	PRYOR, JERMAINE	30.00		.00	
XXX-XX-XXXX	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-XXXX	SIERRA, NALSON	30.00		.00	
XXX-XX-XXXX	WARD, CURTIS	30.00		.00	
XXX-XX-XXXX	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-XXXX	WYNN, CURTIS D.	30.00		.00	
Santrago, P. - missing		30.00			
MEMBERS IN SHOP 19					
William, L. - missing		570.00		150.00	
Missing pmt.		TOTAL DUE: 570.00		150.00	
Adams 2/16		30.00			
		600.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

MAY 02 2016

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 04/2016

REF. #: 0502201604

PAGE #: 1

L # 3947

750.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	ADAMS, ERIC	30.00		.00	
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	CABRERA, JESSE	30.00		.00	
XXX-XX-	CONSOLO, ROBERT	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	FALCON, JOSE	30.00		.00	
XXX-XX-	GHANSHIAM, CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PRYOR, JERMAINE	30.00		.00	
XXX-XX-	SANTIAGO, PAGO EDDIE	30.00		75.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, LASCELLES JUNIOR	30.00		75.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	

MEMBERS IN SHOP: 21

CURRENT DUE:

630.00

150.00

TOTAL DUE:

630.00

150.00

missing:

1) Falcon, Adams, Consolo (2/16)

30.00

2) Santiago

(3/16) Williams, L

30.00 + 30.00

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

750.00

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation)

Life Benefit Plan Payment

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

MAY 31 2016

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMHURST NY 11030

SHOP # 0502

PERIOD: 9/2015

REF. #: 0502201404

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	SHIP BENEFIT PLAN PAYMENT
XXX-XX-XXXX	ADAMS, ERIC	30.00		00	
XXX-XX-XXXX	BANDOO, DE RHINDRA	30.00		00	
XXX-XX-XXXX	BARBER, JERRY	30.00		00	
XXX-XX-XXXX	DEL IND, MICHAEL FRANK	30.00		00	
XXX-XX-XXXX	CABRERA, JESSE	30.00		00	
XXX-XX-XXXX	CENOBLE, ROBERT	30.00		00	
XXX-XX-XXXX	DE BRUY, DERECK MICHAEL	30.00		00	
XXX-XX-XXXX	ELSON, JOSE	30.00		00	
XXX-XX-XXXX	CHANGTAM, CHANDRA	30.00		00	
XXX-XX-XXXX	COMALEZ, MONYSA FRANCISCO ARGENTIS	30.00		00	
XXX-XX-XXXX	FINCH, MARTIN ALDECA	30.00		00	
XXX-XX-XXXX	MCHELL, DEBRA	30.00		00	
XXX-XX-XXXX	PEREZ, MANANDE	30.00		00	
XXX-XX-XXXX	PRYOR, JERMAINE	30.00		00	
XXX-XX-XXXX	SANTIAGO, RAGO EDDIE	30.00		00	
XXX-XX-XXXX	SPEERHERNE, RAMLOCHAN	30.00		00	
XXX-XX-XXXX	STERRAT, NALBON	30.00		00	
XXX-XX-XXXX	WARD, CURTIS	30.00		00	
XXX-XX-XXXX	WILLIAMS, LASCELLES JUNIOR	30.00		00	
XXX-XX-XXXX	WILLIAMS, TISHAWN	30.00		00	
XXX-XX-XXXX	WYNN, GURTIS D.	30.00		00	
MEMBERS IN SHOP 21		CURRENT DUE	630.00	50.00	
		TOTAL DUE	630.00		

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

**325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399**

UNION ALL - PURPOSE REPORTING FORM

JUL 05 2016

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

#4665

OU #B
630.00

SHOP #: 0502

PERIOD: 06/2016

REF. #: 0502201606

PAGE #: 1

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	ADAMS, ERIC	30.00		.00	
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	CABRERA, JESSE	30.00		.00	
XXX-XX-	CONSOLO, ROBERT	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	FALCON, JOSE	30.00		.00	
XXX-XX-	GHANSHIAM, CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PRYOR, JERMAINE	30.00		.00	
XXX-XX-	SANTIAGO, PACO EDDIE	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, LASCELLES JUNIOR	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 21		CURRENT DUE:	630.00		
		TOTAL DUE:	630.00		

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

AUG 16 2016

UNION ALL - PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 07/2016

REF. #: 0502201607

PAGE #: 1

#4809

600.00

SOCIAL SECURITY NUMBER	LAST NAME, FIRST NAME	LIFE DUES	TERMINATION DATE	INITIATION FEE	LIFE BENEFIT PLAN PAYMENT
XXX-XX-	ADAMS, ERIC	30.00		.00	
XXX-XX-	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-	BARBER, JERRY	30.00		.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-	CABRERA, JESSE	30.00		.00	
XXX-XX-	CONSOLO, ROBERT	30.00		.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-	FALCON, JOSE	30.00		.00	
XXX-XX-	CHANSIAM, CHANDRA	30.00		.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENTIS	30.00		.00	
XXX-XX-	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-	PEREZ, AMANDO	30.00		.00	
XXX-XX-	PRYOR, JERMAINE	30.00		.00	
XXX-XX-	SANTIAGO, PAGO EDDIE	30.00		.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-	SIERRA, NALSON	30.00		.00	
XXX-XX-	WARD, CURTIS	30.00		.00	
XXX-XX-	WILLIAMS, LASCELLES JUNIOR	30.00		.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 21		CURRENT DUE: 630.00			
		TOTAL DUE: 630.00			
		- 30.00			
		600.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE LIFE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

UNION ALL-PURPOSE REPORTING FORM

NOV 29 2016

LIBERTY ASHES
112 PHYLIS COURT
ELMONY, NY 11030

SHOP #: 0502

PERIOD: 08/2016

REF. #: 0502201608

PAGE #: 1

6227

600.00

SOCIAL SECURITY NUMBER	LAST NAME - FIRST NAME	FEES DUES	TERMINATION DATE	INITIATION FEE	PAYMENT
XXX-XX-XXXX	ADAMS, ERIC	30.00		.00	
XXX-XX-XXXX	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-XXXX	BARBER, JERRY	30.00		.00	
XXX-XX-XXXX	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-XXXX	CABRERA, JESSE	30.00		.00	
XXX-XX-XXXX	CONSOLO, ROBERT	30.00		.00	
XXX-XX-XXXX	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-XXXX	FALCON, JOSE	30.00		.00	
XXX-XX-XXXX	GHANSHIAM, CHANDRA	30.00		.00	
XXX-XX-XXXX	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-XXXX	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-XXXX	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-XXXX	PEREZ, AMANDO	30.00		.00	
XXX-XX-XXXX	SANTIAGO, PACO EDDIE	30.00		.00	
XXX-XX-XXXX	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-XXXX	SIERRA, NALSON	30.00		.00	
XXX-XX-XXXX	WARD, CURTIS	30.00		.00	
XXX-XX-XXXX	WILLIAMS, LASCELLES JUNIOR	30.00		.00	
XXX-XX-XXXX	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-XXXX	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 20		CURRENT DUE: 600.00			
		PREVIOUS BALANCE DUE: 515.00			
		TOTAL DUE: 515.00 2,115.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address.

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

OCT 04 2016

UNION ALL-PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONT NY 11030

SHOP #: 0502

PERIOD: 09/2016

REF. #: 0502201609

PAGE #: 1

#6033

600.00

SOCIAL SECURITY NUMBER	LAST NAME FIRST NAME	MEMBERSHIP DUES	TERMINATION DATE	INITIATION FEE	PAYMENT
XXX-XX-XXXX	ADAMS, ERIC	30.00		.00	
XXX-XX-XXXX	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-XXXX	BARBER, JERRY	30.00		.00	
XXX-XX-XXXX	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-XXXX	CABRERA, JESSE	30.00		.00	
XXX-XX-XXXX	CONSOLO, ROBERT	30.00		.00	
XXX-XX-XXXX	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-XXXX	FALCON, JOSE	30.00		.00	
XXX-XX-XXXX	GHANSHIAM, CHANDRA	30.00		.00	
XXX-XX-XXXX	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-XXXX	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-XXXX	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-XXXX	PEREZ, AMANDO	30.00		.00	
XXX-XX-XXXX	SANTIAGO, PACO EDDIE	30.00		.00	
XXX-XX-XXXX	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-XXXX	SIERRA, NALSON	30.00		.00	
XXX-XX-XXXX	WARD, CURTIS	30.00		.00	
XXX-XX-XXXX	WILLIAMS, LASCELLES JUNIOR	30.00		.00	
XXX-XX-XXXX	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-XXXX	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 20		CURRENT DUE: 600.00			
		TOTAL DUE: 600.00			

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NOTE: We require separate checks for each account. DO NOT CONSOLIDATE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address.

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

NOV 09 2016

UNION ALL-PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONY NY 11030

SHOP #: 0502

PERIOD: 10/2016

REF. #: 0502201610

PAGE #: 1

#6143

600.00

SOCIAL SECURITY NUMBER	LAST NAME FIRST NAME	DUES	TERMINATION DATE	INITIATION FEE	PAYMENT
XXX-XX-XXXX	ADAMS, ERIC	30.00		.00	
XXX-XX-XXXX	BANDOO, DEARMINDRA	30.00		.00	
XXX-XX-XXXX	BARBER, JERRY	30.00		.00	
XXX-XX-XXXX	BELLINO, MICHAEL FRANK	30.00		.00	
XXX-XX-XXXX	CABRERA, JESSE	30.00		.00	
XXX-XX-XXXX	CONSOLO, ROBERT	30.00		.00	
XXX-XX-XXXX	DE ABREU, DERECK MICHAEL	30.00		.00	
XXX-XX-XXXX	FALCON, JOSE	30.00		.00	
XXX-XX-XXXX	GHANSHIAM, CHANDRA	30.00		.00	
XXX-XX-XXXX	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00		.00	
XXX-XX-XXXX	LINCIFORT, WILDECK	30.00		.00	
XXX-XX-XXXX	MITCHELL, DERYCK C.	30.00		.00	
XXX-XX-XXXX	PEREZ, AMANDO	30.00		.00	
XXX-XX-XXXX	SANTIAGO, PACO EDDIE	30.00		.00	
XXX-XX-XXXX	SHESHERINE, RAMLOCHAN	30.00		.00	
XXX-XX-XXXX	SIERRA, NALSON	30.00		.00	
XXX-XX-XXXX	WARD, CURTIS	30.00		.00	
XXX-XX-XXXX	WILLIAMS, LASCELLES JUNIOR	30.00		.00	
XXX-XX-XXXX	WILLIAMS, TISHAWN	30.00		.00	
XXX-XX-XXXX	WYNN, CURTIS D.	30.00		.00	
MEMBERS IN SHOP: 20		CURRENT DUE: 600.00			
TOTAL DUE: 600.00					

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

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LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

DEC 14 2016

UNION ALL-PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONY NY 11030

SHOP #: 0502

PERIOD: 11/2016

REF. #: 0502201611

PAGE #: 1

#6279

600.00

SOCIAL SECURITY NUMBER	LAST NAME FIRST NAME	INITIALS	TERMINATION DATE	INITIATION DATE	PAYMENT
XXX-XX-XXXX	ADAMS, ERIC	30.00	.00		
XXX-XX-XXXX	BANDOO, DEARMINDRA	30.00	.00		
XXX-XX-XXXX	BARBER, JERRY	30.00	.00		
XXX-XX-XXXX	BELLINO, MICHAEL FRANK	30.00	.00		
XXX-XX-XXXX	CABRERA, JESSE	30.00	.00		
XXX-XX-XXXX	CONSOLO, ROBERT	30.00	.00		
XXX-XX-XXXX	DE ABREU, DERECK MICHAEL	30.00	.00		
XXX-XX-XXXX	FALCON, JOSE	30.00	.00		
XXX-XX-XXXX	GHANSHIAM, CHANDRA	30.00	.00		
XXX-XX-XXXX	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00	.00		
XXX-XX-XXXX	LINCIFORT, WILDECK	30.00	.00		
XXX-XX-XXXX	MITCHELL, DERYCK C.	30.00	.00		
XXX-XX-XXXX	PEREZ, AMANDO	30.00	.00		
XXX-XX-XXXX	SANTIAGO, PACO EDDIE	30.00	.00		
XXX-XX-XXXX	SHESHERINE, RAMLOCHAN	30.00	.00		
XXX-XX-XXXX	SIERRA, NALSON	30.00	.00		
XXX-XX-XXXX	WARD, CURTIS	30.00	.00		
XXX-XX-XXXX	WILLIAMS, LASCELLES JUNIOR	30.00	.00		
XXX-XX-XXXX	WILLIAMS, TISHAWN	30.00	.00		
XXX-XX-XXXX	WYNN, CURTIS D.	30.00	.00		
MEMBERS IN SHOP: 20		600.00			
CURRENT DUE:		600.00			
TOTAL DUE:		600.00			

NOTE: We require separate checks for each account. DO NOT CONSOLIDATE DUES AND LIFE BENEFIT PLAN PAYMENTS, as Government Agencies forbid us to commingle these various accounts.

This All-Purpose Reporting Form must be mailed to 325 73rd Street, Brooklyn, N.Y. 11209, by the 10th of every month.

Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

→ Employer may retain YELLOW COPY for its own files ←

Please notify the Union of any Employee's change of address.

LEAGUE OF INTERNATIONAL FEDERATED EMPLOYEES

325 73RD STREET
BROOKLYN, NEW YORK 11209
(718) 238-2399

UNION ALL-PURPOSE REPORTING FORM

LIBERTY ASHES
112 PHYLIS COURT
ELMONY NY 11030

SHOP #: 0502

PERIOD: 12/2016

REF. #: 0502201612

PAGE #: 1

6331

630.00

DEC 29 2016

SOCIAL SECURITY NUMBER	LAST NAME FIRST NAME	MEMBERSHIP DUES	INITIATION FEE	PAYMENT
XXX-XX-	ADAMS, ERIC	30.00	.00	
XXX-XX-	BANDOO, DEARMINDRA	30.00	.00	
XXX-XX-	BARBER, JERRY	30.00	.00	
XXX-XX-	BELLINO, MICHAEL FRANK	30.00	.00	
XXX-XX-	CABRERA, JESSE	30.00	.00	
XXX-XX-	CONSOLO, ROBERT	30.00	.00	
XXX-XX-	DE ABREU, DERECK MICHAEL	30.00	.00	
XXX-XX-	FALCON, JOSE	30.00	.00	
XXX-XX-	GHANSHIAM, CHANDRA	30.00	.00	
XXX-XX-	GONZALEZ MONTAS, FRANCISCO ARGENIS	30.00	.00	
XXX-XX-	LINCIFORT, WILDECK	30.00	.00	
XXX-XX-	MITCHELL, DERYCK C.	30.00	.00	
XXX-XX-	PEREZ, AMANDO	30.00	.00	
XXX-XX-	ROBBINS, MICHAEL FRANCIS Remove	30.00	.00	
XXX-XX-	SANTIAGO, PACO EDDIE	30.00	.00	
XXX-XX-	SHESHERINE, RAMLOCHAN	30.00	.00	
XXX-XX-	SIERRA, NALSON	30.00	.00	
XXX-XX-	WARD, CURTIS	30.00	.00	
XXX-XX-	WILLIAMS, LASCELLES JUNIOR	30.00	.00	
XXX-XX-	WILLIAMS, TISHAWN	30.00	.00	
XXX-XX-	WYNN, CURTIS D.	30.00	.00	
	<i>Pryor, Termaine</i>	<i>30.00</i>		
MEMBERS IN SHOP: 21		CURRENT DUE: 630.00		
		TOTAL DUE: 630.00		
		<i>Jermaine Pryor</i>		

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Life Payment (Dues & Initiation) _____ Life Benefit Plan Payment _____

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